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## BIB DATA SHEET

CONFIRMATION NO. 5020

| SERIAL NUMBER | FILING or 371(c)<br>DATE<br>RULE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET<br>NO. |
|---------------|----------------------------------|-------|----------------|------------------------|
| 10/813,363    |                                  | 375   | 2611           | 1875.5620001           |

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/540,295 01/30/2004

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## \*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

06/14/2004

| Foreign Priority claimed                              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|---|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met                        | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |                  |                 |              |                    |
| Verified and<br>/TESFALDET<br>BOCURE/<br>Acknowledged | Examiner's Signature  | Initials                                     | CA               | 26              | 21           | 2                  |

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## TITLE

Transceiver device with a transmit clock signal phase that is phase-locked with a receiver clock signal phase

|                                   |   |  |
|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>788 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                            |
|                                   |   | <input type="checkbox"/> 1.16 Fees (Filing)                  |
|                                   |   | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
|                                   |   | <input type="checkbox"/> 1.18 Fees (Issue)                   |
|                                   |   | <input type="checkbox"/> Other _____                         |
|                                   |   | <input type="checkbox"/> Credit                              |